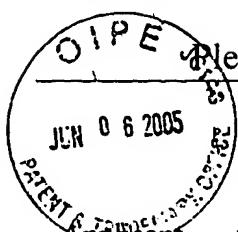


Please Direct All Correspondence to Customer Number 20995

**AMENDMENT / RESPONSE TRANSMITTAL**

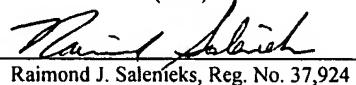
Applicant : Hutton et al.
App. No : 10/007,642
Filed : November 6, 2001
For : BILLING MODIFIER MODULE FOR
 INTEGRATED EMERGENCY
 MEDICAL TRANSPORTATION
 DATABASE SYSTEM
Examiner : Martin A. Gottschalk
Art Unit : 3626

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

June 2, 2005

(Date)



Raimond J. Salenieks, Reg. No. 37,924

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

(X) Amendment in 8 pages.

The fee has been calculated as shown below:

The present application qualifies for Small Entity Status under 37 CFR 1.27.

FEE CALCULATION					
FEE TYPE		FEE CODE	CALCULATION	TOTAL	
Excess Claims > 20	18 - 20 = 0	2202 (\$25)	0 x 25 =	\$0	
Independent > 3	2 - 3 = 0	2201 (\$100)	0 x 100 =	\$0	
Multiple Claim	1.16(j)	2203 (\$180)		\$0	
1 Month Extension	1.17(a)(1)	2251 (\$60)		\$0	
2 Month Extension	1.17(a)(2)	2252 (\$225)		\$225	
3 Month Extension	1.17(a)(3)	2253 (\$510)		\$0	
				TOTAL FEE DUE	\$225

Please Direct All Correspondence to Customer Number 20995

- An extension of time is hereby requested by payment of the appropriate fee indicated above.
- A check in the amount of \$225 is enclosed.
- Return prepaid postcard.
- Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



Raimond J. Salenieks
Registration No. 37,924
Agent of Record
Customer No. 20,995
(619) 235-8550

1739417 060205